



PATENT
Docket: 16356.573 (DC-02636)
Customer No. 000027683

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:
William Frederick Sauber

Serial No.: 09/768,073

Filed: January 23, 2001

For: SYSTEM FOR PROVIDING A VIDEO
SIGNAL TO A DISPLAY DEVICE IN A
SCALABLE PLATFORM

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Group Art Unit: 2498

Examiner: Nguyen, Hau H.

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AUG 25 2004

Technology Center 2600

AMENDMENT AND REQUEST FOR RECONSIDERATION UNDER 37 CFR 1.116

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action dated July 12, 2004, please amend the
above-identified application as follows:

INTRODUCTORY COMMENTS

Claims 1, 6, 10, 15 and 21 are amended and claims 1, 6, 9-10, 15, 18 and 21 remain in the application. Re-examination and reconsideration of the application, as amended, are requested.

AP/2676
61

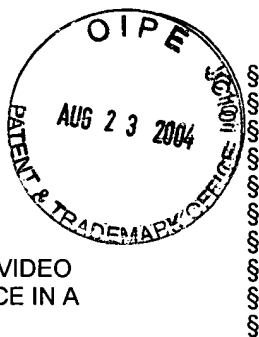
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Alexandria, VA 22313-1450

Sir:

In response to the Final Office action dated July 12, 2004, enclosed are the following regarding the above-identified patent application:

1. Amendment and Request for Reconsideration Under 37 CFR §1.116;
2. Return postcard; and
3. Transmittal letter.

☐ Small entity status of this application has been established by a previously submitted verified statement under 37 C.F.R. §§ 1.9 and 1.27.

☒ No additional fee is required.

The fee has been calculated as shown below:

This fee has been calculated as shown below:											
	<u>(Col. 1)</u>		<u>(Col. 2)</u>		<u>(Col. 3)</u>		<u>SMALL ENTITY</u>		<u>OTHER THAN A SMALL ENTITY</u>		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDIT. FEE	<u>OR</u>	RATE	ADDIT. FEE
TOTAL	7	minus	21	= 0	x 9	\$ _____	OR	x 18	\$ _____		
INDEP	3	minus	3	= 0	x 43	\$ _____	OR	x 86	\$ _____		
[]	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ 140	\$ _____	OR	+ 280	\$ _____	
						TOTAL	\$ _____	OR	TOTAL	\$ _____	

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.


☐ Please charge Deposit Account No. [08-1394 H&B] in the amount of \$ _____.

☐ A check in the amount of \$ _____ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. [08-1394 H&B, Order No. 16356.573 (DC-02636)].

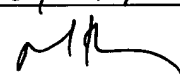
- [X] Any additional filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
[] Any patent application processing fees under 37 C.F.R. § 1.17.
[] A copy of this sheet is enclosed.

Respectfully submitted,


James R. Bell
Registration No. 26,528

Dated: 8-19-04
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A-167098_1.DOC

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
on	8/19/04
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